

# **William H and Mary L Boyd Foundation Incorporated**

**"Scholarship Award Application for the Academic Year(s) 2026 and 2027"**

**Foundation Website: williamandmaryboyd.com**

## **1) Personal Information: complete even if you sent an application in another year.**

**1a - First Name \_\_\_\_\_, Last Name \_\_\_\_\_ Middle \_\_\_\_\_**

**1b - Social Security Number \_\_\_\_\_**

**1c - Date of Birth: Month \_\_\_\_\_, Day \_\_\_\_\_, Year (four digits) \_\_\_\_\_**

## **2) Mailing Address:**

**2a - Street \_\_\_\_\_**

**2b - City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ - \_\_\_\_\_**

**2c - Cell Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_**

**2d - Email Address: \_\_\_\_\_**

**3) Church Affiliation:**

**3a - Church Name:** \_\_\_\_\_

**3b - Pastor Name:** \_\_\_\_\_

**3c - Church Street Address:** \_\_\_\_\_

**3d - City:** \_\_\_\_\_ , **State:** \_\_\_\_\_ , **zip code:** \_\_\_\_\_ - \_\_\_\_\_

**4) University/College or Trade Organization You Will Be Attending/Studying**

**4a - Start date: Month** \_\_\_\_\_ **Year - Through Year** \_\_\_\_\_

**4b – Organization/University /College/Trade School Name:**

\_\_\_\_\_

**4c - Street Address :** \_\_\_\_\_

**4d- City:** \_\_\_\_\_ , **State:** \_\_\_\_\_ , **Zip Code:** \_\_\_\_\_ - \_\_\_\_\_

**4e - Housing – On Campus: YES** \_\_\_\_\_ **NO** \_\_\_\_\_ ; **Off Campus: Yes** \_\_\_\_\_ **N** \_\_\_\_\_

4f - check please - First-year \_\_\_ Sophomore \_\_\_ Junior \_\_\_ Senior \_\_\_ Masters \_\_\_ Other \_\_\_

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**5) Please update or signup for “CASH APP” to receive your award. –This is the method UTILIZED to receive your award!**

**Note:** You will receive your award in monthly amounts via “CASH APP “ sent to you. ( Note: you can supply the institution address after you are enrolled in school during January 2027). If you are taking home courses be sure it is stated on the application.

**6) Emergency Contact information**

**6a - Name:** \_\_\_\_\_

**6b - Address:** \_\_\_\_\_

**6c - City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip** \_\_\_\_\_

**6d - Phone (cell):** \_\_\_\_\_ **Other** \_\_\_\_\_

**7) It is okay to add Extra Sheet(s) if needed for your Scholarship Application for Year 2026 and 2027**

**8) How did you find out about this Scholarship?**

**Name:** \_\_\_\_\_ **Other:** \_\_\_\_\_

**9) Your Signature and Date :**

**Print Student Name:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Student Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Foundation Review**

**Foundation Reviewer Name:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Foundation Reviewer Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_